DATE	OAG	RECEIVED	



Did not carry, exhibit or use a deadly weapon

PEACE OFFICER INVOLVED INJURIES OR DEATH REPORT

As required by Art. 2.139 of the Texas Code of Criminal Procedure, law enforcement agencies shall report all officer-involved injuries or deaths caused by the discharge of a firearm. Pursuant to the requirements of Art. 2.139, the following reporting form has been created for reporting such incidents.

"Officer-involved injury or death" means an incident during which a peace officer discharges a firearm causing injury or death to another." Art. 2.139 Code of Criminal Procedure

 $\textbf{\textit{Email completed form to:}} \ of ficers hooting report @ texas attorney general. gov$

DATE OF REPORT 06/06/20	016		
AGENCY/FACILITY INFORMATION			
Name of Agency/Facility HC	DUSTON POLICE DEPARTME	ENT	
Address 1200 TRAVIS			
City HOUSTON		Zip Code 77002	
Telephone Number (713)	308-3642		
Signature of Director of Agen	icy/Facility (Required)	ha 2 mon	I Luo, Acting Chief of
Name of Person Filling Out Fo	SERGEANT ODON BELM	AREZ	
Email of Person Filling Out Fo	rm ODON.BELMAREZ@HOU	STONPOLICE.ORG	i
1. WHAT WAS THE INJURED OF	R DECEASED'S GENDER?	8. WHAT WAS THE PEACE OFFICER'S GENDER?	
		✓ Male ☐ Female	
2. WHAT WAS THE INJURED O	R DECEASED'S AGE AT TIME OF INCIDENT?	9. WHAT WAS THE PEACE OFFICER'S AGE AT THE TIME OF THE INCIDENT?	
30	☐ Not Available	55	
(Mark one based on information r	R DECEASED'S RACE/ETHNICITY? eported on state driver license application, state ther government reported identification if available	10. WHAT WAS THE PEACE OFFICER'S RACE/ETHNICITY? (Mark only one)	
and known. If not available, mark no		☐ American Indian	☐ Black or African American
☐ American Indian	☐ Black or African American	or Alaska Native	Hispanic or Latino
or Alaska Native	☐ Hispanic or Latino	☐ Anglo or White	☐ Other
🗹 Anglo or White	□ Other	Asian or Pacific Islande	r
Asian or Pacific Islander	☐ Not Available	11. DURING THE INCIDENT, PEACE OFFICER WAS:	
4. DATE OF INCIDENT		☑ On Duty ☐ Off Duty	
Month 5 Day	24 Year 2016		
TIME: Hour 4	24 Year 2016 Min 27 □ AM	OR MORE OFFICERS:	ESPONDING TO CALL OR REQUEST WITH ONE
5. LOCATION OF INCIDENT		☐ Yes 💆 No	
Street address 6700 JO	YNER	13. INCIDENT OCCURRED DURING OR AS A RESULT OF A:	
City HOUSTON		☐ Emergency Call or Request for Assistance	
County HARRIS	_{Zip} <u>77087</u>	☐ Traffic stop	
6. INCIDENT RESULTED IN:	☑ Injury ☐ Death	☐ Execution of a warrant	
O. INCIDENT RESULTED IN:	e injury Death	☐ Hostage, barricade, or	other emergency situation
7. INJURED OR DECEASED PI	ERSON:	☑ Other – Specify type of call	
☐ Carried, exhibited or use	d a deadly weapon	ON VIEW AUTO-	THEFT